

MATERIAL SAFETY DATA SHEET 01316

National Gypsum Company
2001 Rexford Road
Charlotte, NC 28211

For emergency product safety information call, Director Quality Services Management at 704-365-7543.

I PRODUCT IDENTIFICATION

This material safety data sheet is applicable to the following Gold Bond[®] brand products:

Uni-Kal[®] Veneer
Uni-Kal[®] Tough Kote
Kal-Kote[®] Smooth Finish
Kal-Kote[®] F
Kal-Kote[®] Texture Finish
X-KALibur[®]

Chemical Family: Mixture

II HAZARDOUS INGREDIENTS

Contains:

<u>Chemical Identity</u>	<u>CAS-NO</u>	<u>OSHA</u> <u>PEL</u> (mg/m ³)	<u>ACGIH</u> <u>TLV</u> (mg/m ³)
Plaster of Paris	10034-76-1	5	10 ^A
Calcium Hydroxide	1305-62-0	5	5
Quartz ^B	14808-60-7	^C	0.1

Contains no asbestos. HMIS Hazard Class No. 1, 0, 0

^A Total dust All others respirable dust.

^B Present as a naturally occurring component of minerals. See Sec. III HEALTH HAZARD DATA.

^C Respirable dust. Use the formula $\frac{10\text{mg/m}^3}{\% \text{SiO}_2 + 2}$.

Appearance and Odor

A white powder with no odor.

Fire Hazard Data- Not combustible. NFPA Hazard Class No. 1, 0, 0

Extinguishing media

Dry chemical, foam, water fog or spray.

Special Firefighting Procedures

Wear full protective equipment and an approved pressure demand self-contained breathing apparatus.

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Reactivity Data

Gold Bond® brand plasters are stable and hazardous polymerization will not occur. When heated to decomposition, oxides of sulfur and or carbon will be released.

III HEALTH HAZARD DATA

Quartz (crystalline silica)- The International Agency for Research on Cancer (IARC) classifies crystalline silica inhaled in the form of quartz or cristobalite from occupational sources as carcinogenic to humans, Group 1. The National Toxicology Program (NTP) classifies respirable crystalline silica as a substance which may be reasonably anticipated to be a carcinogen. OSHA does not regulate crystalline silica as a human carcinogen.

It is recommended that a NIOSH approved respirator, for toxic dusts, be worn whenever working with this product results in airborne dust exposure exceeding the prescribed limits.

Skin Contact

May cause irritation on contact with open wounds or prolonged contact.

Eye Contact

Direct contact may cause chemical burns.

Inhalation (Exposure occurs when mixing the dry product)

Target Organ: respiratory system

Signs and Symptoms of Exposure to Airborne Dust

Continued and prolonged exposure to airborne dust concentrations in excess of the PEL/TLV may result in cough, dyspnea, wheezing, and impaired pulmonary function.

Medical Conditions Generally Aggravated by Exposure

Overexposure would generally aggravate respiratory system dysfunctions.

First Aid Procedures

Eye: Immediately flush eyes with water for 15 minutes and get medical attention.

Skin: Flush and wash skin with soap and water. Get medical attention if irritation persists.

Breathing: Move the exposed person to fresh air at once. If not breathing initiate pulmonary resuscitation. Get medical attention.

IV PRECAUTIONS for SAFE HANDLING

Steps to be Taken in Case Material is Released or Spilled

Shovel or scoop up back into container for use if possible or disposal.

Waste Disposal Method

Dispose of in accordance with applicable federal, state, and local regulations.

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Precautions to be Taken in Handling and Storing

Keep dry to preserve usefulness.

V CONTROL MEASURES

Work/Hygiene Practices

Avoid creating dust.

Ventilation

Provide ventilation to maintain a dust level below the PEL/TLV.

Respiratory Protection

A NIOSH approved respirator for toxic dusts is recommended if the PEL/TLV is exceeded.

Eye Protection

Safety glasses or goggles.

VI REGULATORY INFORMATION

SARA Title III Section 313 Ingredients

None at or above the de minimus level.

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